## Zoom Imaging, LP

NMSBI

3445 High Point Boulevard, Suite 300 Bethlehem, PA 18017

# RECEIVED REGION 1

2M7 JAN -3 PM 1: 47

**610 861 3080** office

**610 861 3084** fax

www.zoomimaging.com

December 29, 2006

03036908

NRC License No: 37-31034-01 DER License No: PA-0966

Michael I. Rothman, MD

Gregg D. Schubach, MD

Licensing Assistant Section
Nuclear Materials Safety Branch
U.S. Nuclear Regulatory Commission, Region I
475 Allendale Road
King of Prussia, PA 19406-1415

Joel D. Neuman, MD

Theresa M. Fink Director of Operations

To Whom It May Concern:

We have discontinued providing diagnostic Nuclear Medicine procedures under the facilities radioactive materials licenses as of 12/29/06. Therefore, we are requesting that our both our NRC and DEP Radioactive Material Licenses be terminated.

Enclosed you will find NRC form 314 – Certificate of Disposition of Materials, and all associated information required for license termination.

If you require any additional information with regard to our request to terminate our license, please feel free to contact us.

Sincerely,

Theresa M. Fink
Director of Operations

139919 NM88/RGN) MATERIAL S-602



	LATORY COMMISSION	APPROVED BY OMB: NO. 3150-8028	EXPRES: 07/31/2004				
(7-201) 10 CFR 30.36((X1); 46-42((X1); 70.38((X1); and 72.54((X1))  CERTIFICATE OF DISPOSITION OF	Estimated burden per response to comply with it This submitted is used by MRC as part of the bardessed for exmentioned use. Send commental Management Branch (T-6 EB), U.S. Muckear 20055-0001, or by internal e-mail to bis 120 no. gov and Regulatory Affairs, NE-DB-10202, (31504 Washington, DC 2000). It a means used to import currently valid DMB control number, the NRC na- required to respond to, the information collection.	vasis for its determination that the facility is regarding burden estimate to the Peccusis Regulatory Commission, Washington, V. and to the Dest Citizar, Office of Information 1903), Office of Management and Budget, as an information cultarilion does not display a					
LICENSEE NAME AND ADDRESS		LICENSE MUMBER mel	DOCKET NUMBER				
Zoom Imaging	37-31034-01 (PA-50-6)	03036908					
3445 High Point Boulevard, Suite 300	LICENSE EXPIRATION DATE	L					
Bethlehem, Pennsylvania 18017	05/31/2015						
A. LICENSE STATUS (Check the appropriate box)  This license has expired.  This license has not yet expired; please terminate it.							
	OSAL OF RADIOACT		- Jan Britania (1997)				
(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)  The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:  1. No radioactive materials have ever been procured or possessed by the licensee under this license.							
<ul> <li>2. All activities authorized by this license have cea under this license number cited above have be</li> </ul>	esed, and all radioactive sen disposed of in the fo	materials procured and/or posses flowing manner.	sed by the woersee				
a. Transfer of radioactive materials to the license							
North American Scientific, Inc., 7435 Greenbush Ave., North Hollywood, CA 91605 (Sealed Sources Only)							
b. Disposal of radioactive materials:							
1. Directly by the licensee:							
All waste materials were monitored after greaters than or equal to background levels when survey meter.							
2. By licensed disposal site:							
3. By waste contractor:  C. All radioactive materials have been removed such that any remaining residual radioactivity is within the limits of 10 CFR Part 20, Subpart E, and is ALARA.							
	VEYS PERFORMED A	ND REPORTED					
1. A radiation survey was conducted by the license							
a. the absence of licensed radioactive material	•		İ				
b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.							
2. A copy of the radiation survey results:							
✓ a. is attached; or ☐ b. is not attached (Provide explanation); or ☐ c. was forwarded to NRC on:							
3. A radiation survey is not required as only sealed sources were ever possessed under this license, and							
a. The results of the latest leak test are attached; and/or b. No leaking sources have ever been identified.							
The person to be contacted regarding the information pro	ovided on this form:						
NAME TITLE Samuel L. Payne, M.S. Radiation Safety C	officer, Zoom Imaging	TELEPHONE (Include An (570) 477-3925	ea Cade) E-MAIL ADORESS sampayne@epix.net				
Mail all future correspondence regarding this ficense to: Zoom Imaging, 3650 Nazareth Pike, PMB 136, Bethlehem, PA 18020-	1115 Phone: (610)867-7700						
C. CERTIFYING OFFICIAL I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT							
PRINTED NAME AND TITLE	31CH PE JAN	La Kath	DATE				
Theresa M. Firak, Director of Operations	lieras	a KN 4000	12/23/2006				
WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY D	I ALL MATERIAL RESPECT	'. 18 U.S.C. SECTION 1001 MAKES IT A	CREENAL OFFENSE TO MAKE A				

## Zoom Imaging 3445 High Point Boulevard Suite 300 Bethlehem, Pennsylvania 18017

#### License Termination Survey Department of Nuclear Medicine

Date: December 29, 2006

This report is submitted in keeping with Nuclear Regulatory Commission Regulations: Guidelines for Decontaminations of Facilities and Equipment Prior to Release for Unrestricted Use.

The Closeout Survey was conducted to close out the entire Department of Nuclear Medicine for Zoom Imaging, Bethlehem, Pennsylvania, NRC License No.: 37-31034-01 and DEP License No.: PA-0966.

This survey was conducted utilizing multiple wipe test samples utilizing soft absorbent paper over 100 cm. sq. areas made at various locations throughout the department (see area map attached). Room surveys for ambient radiation exposure levels were also made utilizing an GM Meter.

#### Survey Results:

All areas wiped and surveyed for ambient exposure levels reveal that no residual contamination was detected in excess of 1000 dpm Beta or Gamma per 100 sq. cm. Refer to attached survey. All areas were indistinguishable form normal background measurements.

It is therefore recommended that this area be released for use as an unrestricted area.

Survey by:

Samuel L. Payne, M.S., R.S.O. Consultant Radiation Physicist

Zoom Imaging, LP NRC License No.: 37-31034-01 PA Licens No.: PA-0966

License Termination Survey Results						
				December 29, 2006		
	Location:	Removable Contaminat ion dpm/100 cm <sup>2</sup>	Area Survey (mR/hr)	Nuclear Medicine Department  Dressing Rooms/Locker Rooms  Hot Lab 8 5 9 Sealed Source Storage		
1	Floor	24	0.03			
2	Floor	11	0.03	4		
3	Floor	-27	0.03			
4	Corridor Floor	3	0.03	Corridor		
5	Hot Lab Floor	-39	0.03	<u> </u>		
6	Outside Wall	43	0.02	Desk		
7	Uptake Probe	-14	0.03	10		
8	Sealed source storage	23	0.03	_     ŭ		
9	Counter	-7	0.03	3 Counter Counter		
10	Counter	-34	0.03			
11	Camera Table	-15	0.02	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		
12	Camera Head	11	0.03			
13	Under counter storage	52	0.03	13 Source Sulter		
14	Hallway	-21	0.03			
15	Hot Lab	9	0.03	Comera Camera		
Mon	Monitoring Equipment			6		
Survey Instrument: Ludium Model 14C S/N: 219334		219334	Outside Wall			
Calibration Date: 07/18/06 Background: .03 mR/hr		mR/hr				
	Well Counter:			$1 \sim 1$		
	Capintec CRC-15W S/N: 171396					
				Survey by:		
				Samuel L. Payne, M.S., RSO		

This is to acknowledge the receipt	of your letter/application dated					
includes an administrative review h	nd to inform you that the initial processing which as been performed.					
TEMM, 37-31034-01  There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.						
Please provide to this office with	nin 30 days of your receipt of this card					
	warded to our License Fee & Accounts Receivable rately if there is a fee issue involved.					
Your action has been assigned Ma When calling to inquire about this a You may call us on (610) 337-5398	action, please refer to this control number.					
NRC FORM 532 (RI) (6-96)	Sincerely, Licensing Assistance Team Leader					